Application or Docket Number
**10/507198**

## CLAIMS AS FILED - PART I

| TOTAL CLAIMS | (Column 1) | (Column 2) |
|---|---|---|
| FOR | NUMBER FILED | NUMBER EXTRA |
| TOTAL CHARGEABLE CLAIMS | *10* minus 20= | |
| INDEPENDENT CLAIMS | *2* minus 3 = | |
| MULTIPLE DEPENDENT CLAIM PRESENT | | ☐ |

* If the difference in column 1 is less than zero, enter "0" in column 2

**SMALL ENTITY TYPE ☐**

| | RATE | FEE |
|---|---|---|
| BASIC FEE | | |
| | XS 9= | |
| | X43= | |
| | +145= | |
| TOTAL | | |

OR

**OTHER THAN OR SMALL ENTITY**

| | RATE | FEE |
|---|---|---|
| BASIC FEE | | *920* |
| | XS18= | |
| | X86= | |
| | +290= | |
| TOTAL | | *920* |

## CLAIMS AS AMENDED - PART II

**AMENDMENT A**

| | (Column 1) CLAIMS REMAINING AFTER AMENDMENT | | (Column 2) HIGHEST NUMBER PREVIOUSLY PAID FOR | (Column 3) PRESENT EXTRA |
|---|---|---|---|---|
| Total | *10* | Minus | ** *20* | = |
| Independent | *2* | Minus | *** *3* | = |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | ☐ | |

**SMALL ENTITY OR**

| | RATE | ADDI-TIONAL FEE |
|---|---|---|
| | XS 9= | |
| | X43= | |
| | +145= | |
| TOTAL ADDIT. FEE | | |

OR

**OTHER THAN SMALL ENTITY**

| | RATE | ADDI-TIONAL FEE |
|---|---|---|
| | XS18= | |
| | X86= | |
| | +290= | |
| TOTAL ADDIT. FEE | | |

**AMENDMENT B** 11/7/6

| | (Column 1) CLAIMS REMAINING AFTER AMENDMENT | | (Column 2) HIGHEST NUMBER PREVIOUSLY PAID FOR | (Column 3) PRESENT EXTRA |
|---|---|---|---|---|
| Total | *10* | Minus | ** *20* | = |
| Independent | *2* | Minus | *** *3* | = |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | ☐ | |

| | RATE | ADDI-TIONAL FEE |
|---|---|---|
| | XS 9= | |
| | X43= | |
| | +145= | |
| TOTAL ADDIT. FEE | | |

OR

| | RATE | ADDI-TIONAL FEE |
|---|---|---|
| | XS18= | |
| | X86= | |
| | +290= | |
| TOTAL ADDIT. FEE | | |

**AMENDMENT C**

| | (Column 1) CLAIMS REMAINING AFTER AMENDMENT | | (Column 2) HIGHEST NUMBER PREVIOUSLY PAID FOR | (Column 3) PRESENT EXTRA |
|---|---|---|---|---|
| Total | | Minus | ** | = |
| Independent | | Minus | *** | = |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | ☐ | |

| | RATE | ADDI-TIONAL FEE |
|---|---|---|
| | XS 9= | |
| | X43= | |
| | +145= | |
| TOTAL ADDIT. FEE | | |

OR

| | RATE | ADDI-TIONAL FEE |
|---|---|---|
| | XS18= | |
| | X86= | |
| | +290= | |
| TOTAL ADDIT. FEE | | |

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."
*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."
The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

**BEST AVAILABLE COPY**